

Membership Investment - Schedule Application

Business Name: _____
Contact Name: _____
Mailing Address: _____
Street Address: _____
Town: _____
State: _____ Zip: _____ Phone #: _____ Fax #: _____
Email: _____
URL http:// _____

(Information given above, excluding your email address, will be posted on the chamber's website and printed in our Business Directory)

Annual Investment

(Please check one by combining part time employees to equal FTEs):

No. of Employees: Full Time _____ Part Time _____

One Time set-up charge \$25.00

- Associate/Non-profit organization 125.00
- Business with up to 4 employees 200.00
- Business with 5 to 10 employees 265.00
- Business with 11 to 50 employees 375.00
- Business with over 50 employees 550.00
- Corporate Membership 1,150.00
(Utility, major industry or manufacturer, etc.)

Total Amount Paid (including set-up charge) \$ _____

Please set up automatic draft _____ Please bill our credit card: _____ MC _____ Visa

Please make check payable to: North Kingstown Chamber of Commerce
and return it with your completed membership application to
8045 Post Road, North Kingstown, RI 02852; Mon- Fri.: 8:30 am- 4:30 pm.

Please write a short, but complete description of your business and include principal products and services.

What category heading would you like your business listed under?

What is your primary reason for joining?
